

Appendix 12

Sydney Region Student Services

Learning and Support Student Profiling – Informal Advice

School:	Code:
Student surname:	Given name:
	SRN:

This form is to be completed for students with autism or mental health characteristics who appear to have moderate to high level support needs. It should be completed prior to any formal application for Integration Funding Support and will provide informal advice to schools on whether to proceed with a formal application.

A disability confirmation does not need to be sought for purposes of this informal advice – **however please attach if available.**

Please complete the table below with reference to the Integration, Funding Support Program student levels <https://detwww.det.nsw.edu.au/media/downloads/intranet/fundsup2.pdf> and fax to **02 9266 8526**.

FOCUS AREAS	LEVEL (Number only)	N/A - Tick
KEY LEARNING AREAS		
Curriculum		
COMMUNICATION		
Receptive Language		
Expressive Language		
PARTICIPATION		
Social Competence		
Safety		
PERSONAL CARE		
Hygiene		
Eating and Dietary		
Health Care Procedures		
MOVEMENT		
Mobility and Positioning		
Hand Motor Skills		

This student has characteristics of:

Mental Health

☐
☐

Autism

Principal Name _____ Signed _____ Date _____

State Office Informal Advice

<input type="checkbox"/>	Consideration should be given to pursuing the Integration Funding Support Program new application process.
<input type="checkbox"/>	This student should be supported from within school resources.

This advice has been provided on the basis of the profile outlined above. Applications for Integration Funding Support will need to provide information relevant to the nominated profile through the online Access Request